

SEP. 20. 2006 1:10PM

CAPITAL CONNECTION

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
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DIVISION OF CORPORATION

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FLORIDA/FOREIGN LP/LLP

Commercial and Industrial, Ltd.

Certificate of Status	0
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Certificate of Limited Partnership

1. Commercial and Industrial, Ltd
(Name of Limited Partnership)
2. 2671 NW 63 rd St. Boca Raton, FL 33496-2032
(Business address of Limited Partnership)
3. Robert S. Herskowitz
(Name of Registered Agent for Service of Process)
4. 2671 NW 63 rd St. Boca Raton, FL 33496-2032
(Florida street address for Registered Agent)
5. [Signature]
(Registered Agent must sign here to accept designation as Registered Agent for service of Process)
6. 2671 NW 63 rd St. Boca Raton, FL 33496-2032
(Mailing address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is 50 years from the date this Certificate is filed with the Secretary of State.

8. Name(s) of general partner(s): _____ Street address: _____

Robert S. Herskowitz 2671 NW 63 rd St. Boca Raton, FL 33496-2032

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this _____ day of _____, 2006.

Signature of all General Partners:

[Signature]
Robert S. Herskowitz, General Partner

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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